

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000002444

**Entity Name:** LINCOLN CHRISTIAN UNIVERSITY, INC.

**Current Principal Place of Business:**

100 CAMPUS VIEW DRIVE  
LINCOLN, IL 62656

**Current Mailing Address:**

100 CAMPUS VIEW DRIVE  
LINCOLN, IL 62656 US

**FEI Number: 37-0711798**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

NORTHWEST REGISTERED AGENT LLC.  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GREEN, DONALD L  
Address        100 CAMPUS VIEW DRIVE  
City-State-Zip: LINCOLN IL 62656

Title            VP  
Name            POPENFOOSE, GARY S  
Address        100 CAMPUS VIEW DRIVE  
City-State-Zip: LINCOLN IL 62656

Title            DIRECTOR OF HUMAN RESOURCES  
Name            BENNETT, MARLA M  
Address        100 CAMPUS VIEW DRIVE  
City-State-Zip: LINCOLN IL 62656

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARLA BENNETT**

**DIRECTOR OF HUMAN  
RESOURCES**

**01/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date